conducted with the assistance of FDA, Maharashtra. This acitivity is proposed to be continued.

(iv) In order to ensure efficient information exchange between drug regulatory officers in the country, in respect of licensing, sampling, prosecution, etc., a countrywide computer networking project has been undertaken by the Central Govt. This will enable the Central Govt, to regularly monitor the enforcement activities and recommend corrective measures.

(v) Pharma industry and trade has been motivated to fight menace of spurious drugs as a shared responsibility. No. of cases could be successfully detected through the initiative taken by Pharma industry involving hiring of retired intelligence officers.

(vi) The recommendation of Mashelkar Committee which was constituted by the Government in 2003, to examine all aspects relating to the drug regulatory system in the country including the problem of spurious/sub standard drugs, are being followed for necessary change in legislation as well as improvement of enforcement activities.

(vii) The Drugs and Cosmetics (Amendment) Bill, 2005 has been introduced in the Rajya Sabha in May 2005 to amend the said Act to provide for stricter penalties to the offenders including a maximum penalty of life imprisonment with a fine of Rs. 1,00,000/-. It was further proposed to make the offence non-bailable, cognizable and to provide for designated courts for speedy trial of the cases.

The proposed amendments will make the law deterrent to the offenders involved in the manufacture or sale of spurious drugs. The involvement of enforcing agencies like Police will help in speedy investigation to book the culprits and in controlling anti-social elements in such activities.

Lack of resources for health-care facilities

1364. SHRIMATI S.G INDIRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Bharat Nirman is not possible until the health care is strengthened which was facing many challenges due to lack of resources;

(b) whether Government had any plans to create medical kiosks which would be within the reach of common people especially rural people and whether Government had received any proposal in this regard; and

(c) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Health Sector is an important constituent for national development.

(b) and (c) No, Sir and no such proposal has been received.

Heavy rush of patients in Delhi hospitals

1365. SHRI RAJU PARMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that various hospitals in the National Capital Territory of Delhi including AIIMS are facing the problem of heavy rush of patients;

(b) if so, what are the details thereof; and

(c) the steps Government propose to take to construct new hospitals in Delhi to tide over the problem?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) There is indeed heavy rush of patients in the Central Government Hospitals in Delhi including AIIMS, as patients from all over the country, especially from neighbouring states visit these hospitals for different medical facilities. However, despite heavy rush of patients in OPD and IPD, adequate medical facilities are being provided to the patients. Steps like computerization for registration, common sample collection, patient information system, special clinics in the afternoon and supervision by designated officers are undertaken to reduce the waiting time of the patients. Further, strengthening and upgradation of the various departments of the Central Government hospitals is undertaken as per the need and availability of financial resources. There is however, no proposal to construct any new Central Government Hospital in Delhi.